

August 30, 2011

VIA CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Mr. E. McRae Budill, Executive Vice President, Programming CSC Holdings, Inc. 1111 Stewart Avenue Bethpage, NY 11714

Re: KABC-TV Election of Retransmission Consent

Dear Sir or Madam:

Pursuant to the Cable Television Consumer Protection and Competition Act of 1992 and Section 76.64 of the rules of the Federal Communications Commission, Station KABC-TV, Los Angeles, located in the Los Angeles, CA designated market area (the "Station"), hereby elects to continue retransmission consent with respect to carriage of the digital signal of the Station on all systems, headends, and franchises owned by, controlled by, or affiliated with the above-referenced entity, in all communities and franchise areas served by such systems, headends, and franchises, for the three-year period commencing January 1, 2012 and ending December 31, 2014 and for any period thereafter to the extent covered by your existing retransmission consent agreements with ABC, on the terms specified in such agreements. This election includes, but is not limited to, all systems, headends, and franchise areas referenced on Exhibit A annexed hereto, each of which will be sent an election letter individually. Please notify us immediately if you have any additional systems that carry the Station which are not included on Exhibit A, or if you have divested any systems included on Exhibit A.

The Station's contact person and address for official correspondence is as follows: Arnold J. Kleiner, President and General Manager, 500 Circle Seven Drive, Glendale, CA 91201.

Sincerely,

Tonia H. David-Sinatra Vice President, ABC

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Legal & Business Affairs

B2 560 KABC-TV

EXHIBIT A

This letter pertains to the following System(s):

Market: KABC-TV

(Los Angeles)

ABC ID Station

NO SYSTEMS IDENTIFIED HE Name Contact Name Contact Title Address City State Zip		
Contact Name Contact Name Contact Title Address City State City City	diZ	
D Contact Name Contact Name Contact Title Address	State	
NO SYSTEMS IDENTIFIED HE Name Contact Name Contact Title Address	City	
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